
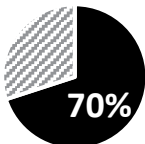







CHRONIC PAIN: THE IMPORTANCE OF A SEX AND GENDER-BASED APPROACH TO TREATMENT

THE ISSUE	THE MECHANISMS	THE SOLUTION
<p>~28M U.S. Women Suffering from Chronic Pain</p>	 <p><u>Nociceptive Pathway Differences</u> Lower kappa-opioid receptor availability and reduced mu-opioid receptor recruitment in women highlight pathway differences at the molecular level</p>	<p><i>As providers, we must appreciate that men and women respond differently to both pain and its treatment</i></p>
 <p>70% Of Patients Seeking Treatment for Chronic Pain are Women</p>	 <p><u>Pharmacological Differences</u> Women require higher doses of analgesic agents to achieve adequate pain control given differences in pharmacokinetic and pharmacodynamic processing</p>	
 <p>Women are 32x More Likely to Return to Pain Clinics than Men</p>	 <p><u>Sex-Specific Considerations</u> OCPs, age, pregnancy, and hormonal fluctuations impact clearance and metabolism of analgesics</p>	
<div style="border: 1px solid black; padding: 10px;"> <p><i>However, Despite Clear Gender Differences...</i></p> <p>~80% Of Pain Research is Conducted on Men</p> </div>	 <p><u>Gender-Specific Considerations</u> Psychosocial differences and constructed gender-norms surrounding pain influence how pain is received and ultimately how pain is treated</p>	<p><i>All patients should be treated as individuals; pre-menopausal, post-menopausal, and transgender women should be met with an individualized approach to pain management that takes the sex and gender differences that exist into account</i></p>